

OREGON INDEPENDENT CHOICES 1115 DEMONSTRATION

FACT SHEET

Name of Section 1115 Demonstration:	Independent Choices
Date Proposal Submitted:	July 7, 1998
Date Proposal Approved:	November 22, 2000
Implemented:	December 1, 2001

SUMMARY

This demonstration will allow individuals who are eligible for long term care services to pay cash directly to providers for personal care and related services. The program will be available in three regions of the State for up to 300 consumers.

This waiver is similar in concept to the approved “Cash and Counseling” demonstrations in New Jersey, Florida, and Arkansas. The main difference of this proposal is that it would not employ a randomized or experimental design; rather, the State permits a total of 300 eligible individuals to participate in this demonstration on a voluntary, first-come, first-serve basis. In addition, compared to “Cash and Counseling”, this demonstration has less fiscal intermediary intervention. A monthly service allocation is paid directly into the consumer’s Independent Choices checking account. Consumers would be responsible for deducting appropriate taxes and calculating employer payroll taxes. Providers are paid by the consumer directly from the service allotment. A payroll service is available to consumers who do not pass a competency test or who simply would like assistance.

ELIGIBILITY

To be eligible for this demonstration, consumers must:

- (1) be 18 years or older,
- (2) meet Oregon’s financial eligibility for long term care services
- (3) meet Oregon’s functional impairment criteria within service priority levels,
- (4) be documented to receive services through the State’s home and community based waiver, and
- (5) possess a demonstrated ability individually, or through a representative, to appropriately assess and plan for the adequate provision of services necessary for participant care.

BENEFIT PACKAGE

The service package in this demonstration consists of the following services: homemaker services, personal care services, transportation, chore services, adult companion services, attendant care, and in-home services. Consumers are permitted to accumulate savings from their personal budget for special approved purchases, such as respite care or home modifications.

ENROLLMENT/DISENROLLMENT PROCESS

Enrollment in this demonstration is voluntary for all eligible participants. Interested participants have the option to select either a fiscal intermediary or assume the cash payment responsibility themselves. Those participants who decide to assume the cash payment responsibility are required to pass a test to demonstrate competency with respect to their fiscal and legal obligations as an employer. Those who do not pass the test are required to use a fiscal intermediary.

DELIVERY SYSTEM

Services in the demonstration are provided by private individuals, employed and directly supervised by the consumer. Relatives, including spouses, may be employed as providers. Consumers are provided criminal background information upfront on all potential caregivers.

The demonstration is less than Statewide and operates in three service areas with up to 100 participants enrolled in each site. The State indicated in its proposal that the selection of these three sites allows the State to evaluate the replicability of the model Statewide and to evaluate the program in both urban and rural settings.

QUALITY ASSURANCE

Consumers negotiate and execute a Participation Agreement and define a initial budget based on a functional assessment. Health reassessments for each consumer are conducted semiannually; thus allowing the service allocation to be updated, accordingly. The State conducts consumer satisfaction surveys and random audits of consumer bank accounts to ensure that consumers are meeting their fiscal and legal obligations as employers.

COST-SHARING

Not applicable.

MODIFICATIONS

On February 20, 2001, the State accepted the approval of the demonstration with the exception of one term and submitted a request for an amendment to allow payments to spouses. This amendment was approved on May 7, 2001.

Contact – Carrie Smith – 410-786-4485 – e-mail- csmith6@cms.hhs.gov

6/25/02